

BEE CAVE PUBLIC LIBRARY Adult Volunteer Application

Date:_____

apply, please fill out the fo Cave, TX 78738, by fax 51				
Name:				
Address:				
City	City Zip			
Phone:		_ (home)	(cell)	
		_ (work)		
Email:				
Please circle day/time avai	lable:			
Tues.	Wed.	Thurs.	Fri. 10-12	Sat.
10-12 1-3	10-12 1-3	10-12 1-3	10-12 1-3	10-12 1-3
3-5	3-5	3-5	3-5	3-5
5-7	5-7	5-7		
I would like to work (circle) 1 2 3 4 9	shifts per month.		
I would prefer to	work occasion	ally on special	projects, suc	h as:
Please describe any lib	orary experien	ce or special sl	kills you would	d like to share:
				_
Date received:				

Date contacted:

Date Trained/By:_____